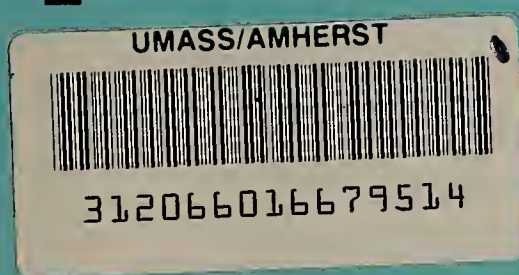


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SHINE

**Serving Health
Information Needs
of Elders**



GOVERNMENT DOCUMENTS
COLLECTION

OCT 15 1997

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A Massachusetts Guide to Medicare & Medicare HMO APPEALS

*---what you need to know about
Hospital and Medical Appeals*

**Commonwealth of Massachusetts
Executive Office of Elder Affairs**

**The Serving Health Information Needs of Elders (SHINE)
Health Insurance Counseling Program**

William F. Weld
Governor

Argeo Paul Celluci
Lieutenant Governor

Franklin P. Ollivierre
Secretary

Commonwealth of Massachusetts
Executive Office of Elder Affairs

A Massachusetts Guide to Medicare & Medicare HMO APPEALS

*----what you need to know about
Hospital and Medical Appeals*

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(SHINE) Health Insurance Counseling Program

Disclaimer

The Executive Office of Elder Affairs does not sell, recommend, promote, or endorse any insurance product, company or agent. The information in this guide is being provided to assist consumers in making informed purchasing decisions. Every effort has been made to ensure the accuracy of this information; however, some of the information may be subject to correction. This guide will be updated periodically.

Acknowledgments

This consumer booklet has been developed by the Executive Office of Elder Affairs Serving Health Information Needs of Elders (SHINE) Health Insurance Counseling Program. SHINE's counseling and information services are free and confidential. SHINE is funded through grants from the United States Health Care Financing Administration and the Massachusetts Councils on Aging that are administered by the Executive Office of Elder Affairs.

The Executive Office of Elder Affairs recognizes that most Medicare beneficiaries are unaware of their rights to appeal medical decisions. This booklet was developed to give the health care consumer a better understanding of the Medicare appeal systems so they can improve the quality of care they receive. This booklet explains how to start a Medicare or Medicare HMO appeal.

A SHINE Telephone List appears at the end of this booklet. You may also contact the Executive Office of Elder Affairs at 1-800-882-2003, your Council on Aging or Area Agency on Aging in your area to learn about the SHINE Program nearest you.

Note: The SHINE Program welcomes requests from not-for-profit organizations to excerpt or utilize the contents of this publication. Please contact the SHINE Program at the Executive Office of Elder Affairs, 1 Ashburton Place, 5th floor, Boston, MA, 02108 for permission.



The Commonwealth of Massachusetts

Executive Office of Elder Affairs

One Ashburton Place, Boston, MA 02108

WILLIAM F. WELD
GOVERNOR

MARGO PAUL CELLUCCI
LIEUTENANT GOVERNOR

FRANKLIN P. OLLIVIERRE
SECRETARY

Phone (617) 727-7750
Fax (617) 727-9368

January 1, 1997

Dear Senior Citizen or Medicare Beneficiary:

The Medicare appeals and complaints system is difficult to understand. This APPEALS Booklet was designed to help you identify situations where you may have been wrongfully denied Medicare coverage. And, just as important, after you have read this material, you will know how to start an appeal within the time guidelines of the Medicare fee-for-service system or the Medicare HMO appeal system.

If you have health insurance problems or questions, we encourage you to contact SHINE, the health insurance counseling program for senior citizens and disabled Medicare beneficiaries administered by the Executive Office of Elder Affairs. The **Serving Health Information Needs of Elders Program (SHINE)** has 465 health insurance counselors across Massachusetts. SHINE counselors provide free, one-on-one counseling to senior citizens and Medicare beneficiaries of any age. Also, SHINE publishes this informative booklet, "*A Massachusetts Guide to Medicare and Medicare HMO APPEALS*", to help you learn about your rights to have medically necessary care and how to report a quality of care complaint or appeal a medical decision made by your medical provider.

SHINE Counselors help elders understand what Medicare covers, how Medigap and Medicare HMO plans work with Medicare, how to decide which Medigap or Medicare HMO coverage they should buy, and how to apply for Medical Assistance programs. Once elders are insured, SHINE Counselors can show them how to file for reimbursement claims, how to access care through the HMO, and how to exercise their Medicare appeal rights in the managed care and fee-for-service systems of health care.

On page 11 of this booklet, the **SHINE Program Telephone Directory** with a town-by-town index identifies the Regional SHINE Health Insurance Counseling Program serving your community. We hope you will contact a SHINE Counselor whenever you have questions about your health insurance coverage.

Sincerely,

A handwritten signature in black ink, appearing to read "Franklin P. Ollivierre".

Franklin P. Ollivierre

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How to Appeal a Medicare Claim

Introduction

If you disagree with a decision on the amount Medicare (or a Medicare HMO) will pay on a claim or whether services you received are covered by Medicare (or the HMO), you have the right to appeal the decision. There are separate appeals processes for Medicare Part A services, Medicare Part B services, and Medicare HMOs.

The appeal processes take time and perseverance in order to succeed. However, it can be worthwhile to appeal a denial when you believe the services being denied are Medicare or Medicare HMO covered services to which you are entitled.

Most appeals involve issues relating to:

- whether or not a service is medically necessary or appropriate for the treatment or diagnosis of an illness or injury.
- how much Medicare will pay towards a claim.
- whether or not a facility or medical provider should provide a certain medical service to a patient (level of care questions).
- the meaning of “urgent” versus “emergency” care in a Medicare Managed Care Plan (HMO).
- the quality of care they receive from medical staff and in medical settings.

It is important to understand there are two types of notices used in the Medicare system: those that are **not official Medicare determinations** and those that are **official Medicare determinations**.

The following are form letters or oral exchanges between a medical provider and a Medicare beneficiary; they are **not official Medicare notices**:

- Notices of Non-Coverage (NNC)
[a SNF may use a “Skilled Nursing Facility Termination Notice”]
- verbal discussions with providers in which Medicare services are terminated or refused.

Official Medicare determinations are issued by the Medicare intermediary, MassPRO, or the Medicare carrier and include the following:

- Notice of Initial Determination
- Notice of Utilization
- Explanation of Medicare Benefits (EOMBs)
- Reconsideration Determination

APPEALS FOR MEDICARE PART A SERVICES

Skilled nursing facility services and home health benefits in the fee-for-service system.

CASE 1: *You have been receiving medical services as a patient in a skilled nursing facility, but have been told by the facility staff that Medicare won't cover your stay after a few more days. What can you do?*

CASE 2: *Or, you want to engage the services of a home health company, but they do not believe you meet one of Medicare's guidelines for home health care. What can you do?*

STEP 1 -

GET A WRITTEN NOTICE OF NON-COVERAGE (NNC)

A Part A provider should give you a written NNC to explain the services you seek will not be paid for by Medicare. If they have spoken to you about "no coverage for benefits", ask them to give you a written NNC.

STEP 2 -

ASK THE PROVIDER TO REQUEST AN OFFICIAL MEDICARE DETERMINATION

If you so request, the provider must submit a "demand bill" (also referred to as a "no-payment bill") to the Medicare intermediary on your behalf. A Medicare beneficiary always has the right to have a claim submitted to Medicare. Therefore, when a provider decides that a service is not covered, a bill at the request of the beneficiary can be submitted. The beneficiary must ask the Part A provider to get the official Medicare determination in order to develop the right to request further appeals. *When beneficiaries are unaware of their rights, they wrongly assume the provider's NNC is an official Medicare determination when, in fact, it is not an official determination by Medicare!*

STEP 3 -

RECEIVE THE OFFICIAL MEDICARE DETERMINATION IN THE FORM OF A NOTICE OF UTILIZATION

Medicare sends you a Notice of Utilization which states its ruling. If you do not receive this official determination within thirty days, then contact the local intermediary. If they rule in your favor, then you get the services requested paid for by Medicare. However, if you still disagree with the ruling, ask for a Reconsideration Determination.

STEP 4 -

REQUEST A RECONSIDERATION DETERMINATION

If you still disagree with the ruling in the Notice of Utilization, ask for a Reconsideration Determination by writing a letter to the intermediary. Its address is on the recent Notice of Utilization. Include in your written request a copy of the NNC and Notice of Utilization. You have 60 days from the date you received the Notice of Utilization to make this request.

STEPS 5 AND BEYOND -

INTERMEDIARY SENDS YOU A RECONSIDERATION DETERMINATION

The intermediary will assign someone new to reconsider your case and issue a determination. If they confirm your belief that Medicare services should be provided to you, then you have won. However, if they continue to rule against you, read the instructions on the reconsideration determination to learn about the next appeal step (a hearing before an Administrative Law Judge).

APPEALS FOR MEDICARE PART A SERVICES

Hospital pre-admission denial

CASE 3: *You want to have your surgery performed at the local acute care hospital, but the hospital has informed you that you will not be admitted as an inpatient for this procedure. What can you do?*

INTRODUCTION

If a hospital decides not to admit you to the hospital, it must give you its decision in writing. However, this decision is **not an official Medicare determination**. In order to get an official Medicare determination, follow these steps:

STEP 1 -

ASK MASSPRO TO REVIEW THE HOSPITAL'S DECISION

You must ask MassPRO to review the hospital's decision. You can ask for an immediate review if you contact MassPRO within three days of the date you received the hospital's decision. You can contact MassPRO by telephone at **1-800-252-5533** or in writing at MassPRO, 235 Wyman Street, Waltham, MA 02154-1231. Otherwise, you have 30 days to ask MassPRO to make a review. If the hospital had already consulted with MassPRO while making its decision, then you are actually asking MassPRO to reconsider the pre-admission denial.

STEP 2 -

RECEIVE MASSPRO'S DETERMINATION

MassPRO will review the hospital's decision and send out an official Medicare determination. If MassPRO agrees with you and decides Medicare should pay for your stay in the hospital, then hospital will be expected to admit you. If MassPRO agrees with the hospital, the reconsideration determination will explain your rights and the next steps to take to continue the appeal.

APPEALS FOR MEDICARE PART A SERVICES

Inpatient hospital Notice of Non-Coverage

CASE 4: *You have been in the hospital for ten days because you have a broken hip. The hospital issues a Notice of Non-Coverage to you stating that in three days time you will be discharged home. You think the discharge is premature. What can you do?*

INTRODUCTION

As a Medicare patient, you have the right to remain in the hospital to receive all necessary care for the proper diagnosis and treatment of your illness or injury.

STEP 1 -

REQUEST TO RECEIVE THE NOTICE OF NON-COVERAGE IN WRITING

The hospital must give you a written notice which explains their belief Medicare will no longer pay for your stay and includes the phone number of the Massachusetts Peer Review Organization (MassPRO).

STEP 2 -

ASK MASSPRO TO REVIEW THE HOSPITAL'S DECISION

To request an immediate review, you must contact MassPRO at **1-800-252-5533** by **noon of the next business day** (Saturdays and Sundays not included) after the date you received the Notice of Non-Coverage. You cannot be charged for any days until noon of the day after MassPro makes its decision, regardless of the outcome of the decision.

If you do not request an immediate review, you will have 30 days to ask MassPRO to make a review. If the hospital had already consulted with MassPRO while making its decision, then you are actually asking MassPRO to reconsider the decision to discharge you from your current Medicare-covered stay in the hospital. You can contact MassPRO by telephone at **1-800-252-5533** or in writing at MassPRO, 235 Wyman Street, Waltham, MA 02154-1231.

STEP 3 -

RECEIVE MASSPRO'S DETERMINATION

MassPRO will review the discharge decision and send out an official Medicare determination (if they are reconsidering their previous decision, then it will be a reconsideration determination). If MassPRO agrees with you and decides Medicare should pay for your stay in the hospital, then the hospital will be expected to retain you as an inpatient for the time being. If MassPRO agrees with the hospital, then the determination will also explain your rights and the next steps to take to continue the appeal.

APPEALS FOR MEDICARE PART B SERVICES

Doctor's services, outpatient hospital care, diagnostic services, durable medical equipment and ambulance services.

Typical Case: *EOMBs are often reviewed when coverage is denied, the amounts allowed seem out of line, when claims are denied for insufficient information or omitted facts, or when the medical necessity of certain procedures has not been fully demonstrated when the claim form was submitted by the Part B provider.*

STEP 1 - REQUEST A REVIEW FROM THE CARRIER BY MAIL OR BY TELEPHONE

On the EOMB attach a note saying "Please review", sign it, and send it back to the carrier. The carrier's name and address are on the form. If appropriate, a letter from the doctor explaining the medical necessity for the procedure can also be included. You have six months to send in your request for a review.

You may also use the telephone to conduct the review. Between 8 AM and 4 PM, Monday through Friday, you may call the carrier for Massachusetts, known as C & S Administrative Services, at **1-800-294-2351** to request a review over the telephone. You must still request the review within six months of the date the EOMB was issued.

When you call, be prepared to tell the carrier the following facts:

- your full name
- current address
- your Medicare health insurance claim (HIC) number
- the 13-digit claim control number on the claim you want reviewed (this is on the EOMB)
- and the date of service.

In most cases, the carrier can inform you of its official determination of the review during the telephone call. You will also receive a formal letter or an adjusted EOMB. Follow the instructions on the review determination if a further appeal is necessary. The next step is a fair hearing before a carrier hearing officer.

For appeals regarding durable medical equipment, the carrier for Massachusetts is:

MetraHealth
DMERC
P.O. Box 6800
Wilkes-Barre, PA 18773-6800
Tel: **1-800-842-2052**

APPEALS FOR MEDICARE HMO - EARLY DISCHARGE

Inpatient hospital Notice of Non-Coverage

CASE 5: *You have been in the hospital for ten days because you have a broken hip. The HMO issues a Notice of Non-Coverage to you stating that in three days time you will be discharged home. You think the discharge is pre-mature. What can you do?*

INTRODUCTION

As a Medicare HMO patient, you have the right to remain in the hospital to receive all necessary care for the proper diagnosis and treatment of your illness or injury.

STEP 1 -

REQUEST TO RECEIVE THE NOTICE OF NON-COVERAGE IN WRITING

The HMO must give you a written notice, called a "*Notice of Non-Coverage*", which explains your appeal rights and includes the phone number of the Massachusetts Peer Review Organization (MassPRO) to call if you wish to request an *immediate review*.

STEP 2 -

ASK MASSPRO TO REVIEW THE HOSPITAL'S DECISION

To request an immediate review, you must contact MassPRO at 1-800-252-5533 by **noon of the next business day** (Saturdays and Sundays not included) after the date you received the Notice of Non-Coverage. You cannot be charged for any days until noon of the day after MassPro makes its decision, regardless of the outcome of the decision.

STEP 3 -

RECEIVE MASSPRO'S DETERMINATION

If MassPRO agrees with you and decides the HMO should pay for your continued stay in the hospital, then the hospital will be expected to retain you as an inpatient for the time being. If MassPRO agrees with the HMO, then the determination will also explain your rights and the next steps to take to continue the appeal.

STEP 4 -

REQUEST A REVIEW WITH HMO (if you did not request an immediate review)

If you are discharged and you wish to appeal your HMO's decision, you will have 60 days from the date on the NNC to ask your HMO to make a review. Send your written request for review to the HMO or the Social Security Office. If the HMO does not rule in your favor, they will automatically send your appeal on to the Network Design Group.

STEP 5 -

AWAIT THE DETERMINATION OF THE NETWORK DESIGN GROUP

The NDG can take up to five months to issue its determination. If you lose at this stage, the determination will contain instructions on how to request a hearing before the Administrative Law Judge.

APPEALS IN MEDICARE HMOs

Case 6: You have been receiving home health services three times a week with Medicare fee-for-service. You decide to enroll in a Medicare HMO and three weeks later you are informed by the Medicare HMO that they will not pay for any further home health services. You feel you still need assistance and you have contacted your primary care physician about your concerns.

INTRODUCTION

Medicare beneficiaries in Medicare HMO plans have similar appeal steps for questioning decisions made by HMO staff as to the medical necessity of services and the appropriateness of certain

settings for receiving medical care. If an HMO refuses to provide Medicare-covered services you have requested, then they must give you the denial in writing.

STEP 1 -

GET THE DECISION IN WRITING

Under the law, the HMO must give you a written denial if the treating physician says you cannot have a particular service. Tell the physician **"I want your decision in writing"**. This denial is called a **"Notice of Initial Determination"**. Along with this notice, the HMO is required to give you an explanation of your appeal rights.

STEP 2 -

ASK FOR A RECONSIDERATION IN WRITING

Send your request for a reconsideration to the HMO within 60 days of the date you received the Notice of Initial Determination. In your letter requesting a reconsideration, tell the HMO that you believe the plan has an obligation to provide the service because you believe it is a Medicare-covered service. Also, include a copy of the written Notice of Initial Determination given to you by the physician or the HMO.

STEP 3 -

RECEIVE THE RECONSIDERATION DETERMINATION

Your HMO has 60 days to reconsider its initial determination to deny the services or payment for services you believe they should provide. If the HMO agrees with you upon appeal, then they shall provide the service or pay for the care you received. However, if the HMO denies your request on appeal, then it must automatically submit your case for further review to an independent group called the Network Design Group (NDG).

STEP 4 -

AWAIT THE DETERMINATION OF THE NETWORK DESIGN GROUP (NDG)

The NDG can take up to five months to issue its determination. If you lose at this stage, the determination will contain instructions on how to request a hearing before the Administrative Law Judge.

DIRECTORY

INTERMEDIARIES - Part A Claims

Aetna Life Insurance Company 203-636-5666
151 Farmington Ave.
Hartford, CT 06156

Associated Hospital Service of Maine 207-822-8484
2 Gannet Drive
South Portland, Maine 04106
Processes claims for: *hospital, SNF, home health, hospice*

CARRIERS - Part B Claims

C & S Administrative Services 800-882-1228
P.O. Box 1000
Hingham, MA 02044-9191

MetraHealth (Travelers Insurance Co.) 800-842-2052
Durable Medical Equipment Regional Carrier
P.O. Box 6800
Wilkes-Barre, PA 18773-6800

MetraHealth (Travelers Insurance Co.) 800-833-4455
Railroad Medicare Claim Service Center
P.O. Box 10066
Augusta, GA 30999-0001

MEDICARE FRAUD & ABUSE HOTLINE

Department of Health & Human Services 800-368-5779
Concerns about abuse of services or billings to Medicare

Office of the Inspector General (Boston) 617-565-2664

C & S Administrative Services (Part B Claims) 800-882-1228

PEER REVIEW ORGANIZATION (PRO)

Massachusetts Peer Review Organization (MassPRO)

235 Wyman Street
Waltham, MA 02154-1231

800-252-5533
617-890-0011

MEDICARE ADVOCACY PROJECT

Serving Essex, Middlesex, Norfolk and Suffolk counties.

Greater Boston Legal Services

197 Friend Street
Boston, MA 02114

800-323-3205
617-371-1234

Serving Barnstable, Dukes, Nantucket and Plymouth counties.

Legal Services for Cape Cod and Islands

460 West Main Street
Hyannis, MA 02601

800-742-4107
508-775-7020

Serving Essex and Middlesex counties.

Merrimack Valley Legal Services

11 Lawrence Street, Suite 324
Lawrence, MA 01840

800-427-2521
508-687-1177

Serving Bristol and Plymouth counties.

Southeastern Massachusetts Legal Assistance Corp.

21 South Sixth Street
New Bedford, MA 02740

800-244-9023
508-996-8576

Serving Franklin, Hampden, Berkshire and Hampshire counties.

Western Massachusetts Legal Services

145 State Street
Springfield, MA 01103

413-781-7814

Serving Worcester county.

Legal Assistance Corp. of Central Massachusetts

405 Main Street, 4th Floor
Worcester, MA 01608

800-649-3718
508-752-3718

**The Commonwealth of Massachusetts
Executive Office of Elder Affairs**

Serving Health Information Needs of Elders ("SHINE") Program

One Ashburton Place, 5th Floor
Boston, MA 02108
Tel: 1-800-882-2003 or (617) 727-7750

Mary Kay Browne, SHINE Program Director 617-727-7750, ext. 330

<u>Area #</u>	<u>Regional Program</u>	<u>SHINE Coordinator</u>	<u>Telephone</u>
Western Mass:			
01	Dalton Council on Aging	Lydia Boynton	800-974-4055
02	Northampton Council on Aging	Joann Lutz	800-498-4232
03	Springfield Council on Aging	Gail Noe	800-307-4463
Central Mass:			
04	Central Mass Agency on Aging	Sharon McKenzie	800-244-3032
05	Community & Home Services of the BayPath Area	Pam LeFrancois	800-287-7284
06	HESSCO (AAA)	Peggy McDonough	800-462-5221
Northeastern Mass:			
07	Danvers Council on Aging	Sara Bronstein	800-598-1122
08	Minuteman Home Care	Cynthia Phillips	617-272-7177
09	Merrimack Valley Elder Services	Elaine Rotolo	800-892-0890
Eastern Mass:			
10	Mystic Valley Elder Services	Holly Kisler	617-324-7705
11	Needham Council on Aging	Maura Walsh	617-964-5009
12	Quincy Council on Aging	Jane Mudge	617-376-1247
13	Boston Commission on Affairs of the Elderly	SHINE Coordinator	617-635-3995
Southeastern Mass:			
14	Edgartown Council on Aging	Marilyn White	508-693-4120
15	Middleborough Council on Aging	Steve Perchard	800-231-1155
16	Attleboro Council on Aging	Marion Aspinall	800-987-2510
17	Coastline Elder Services	Carolyn Avery	508-999-6400
18	Chatham Council on Aging	Beth Fletcher	800-334-9999

SHINE PROGRAM
INDEX OF AREA NUMBERS AND TOWNS

(Find the city you live in and its area. Then look up the Regional SHINE Program from the list.)

<u>Area #</u>	<u>City / Town</u>	<u>Area #</u>	<u>City / Town</u>	<u>Area #</u>	<u>City / Town</u>	<u>Area #</u>	<u>City / Town</u>
15	Abington	02	Buckland	18	Eastham	02	Hawley
08	Acton	08	Burlington	02	Easthampton	02	Haydenville
17	Acushnet			06	Easton	02	Heath
01	Adams	08	Cambridge	14	Edgartown	12	Hingham
03	Agawam	06	Canton	01	Egremont	01	Hinsdale
01	Alford	08	Carlisle	02	Erving	12	Holbrook
13	Allston	15	Carver	07	Essex	04	Holden
09	Amesbury	18	Centerville	10	Everett	05	Holliston
02	Amherst	02	Charlemont			03	Holyoke
09	Andover	13	Charlestown	17	Fairhaven	04	Hopedale
08	Arlington	04	Charlton	16	Fall River	05	Hopkinton
04	Ashburnham	18	Chatham	18	Falmouth	04	Hubbardston
04	Ashby	09	Chelmsford	04	Fitchburg	05	Hudson
02	Ashfield	10	Chelsea	02	Florence	12	Hull
05	Ashland	01	Cheshire	01	Florida	02	Huntington
02	Athol	03	Chester	06	Foxboro	18	Hyannis
16	Attleboro	02	Chesterfield	05	Frammingham	13	Hyde Park
04	Auburn	03	Chicopee	04	Franklin		
06	Avon	14	Chilmark	16	Freetown	07	Ipswich
04	Ayer	01	Clarksburg			13	Jamaica Plain
		04	Clinton	04	Gardner	15	Kingston
18	Barnstable	12	Cohasset	14	Gay Head		
04	Barre	02	Colrain	09	Georgetown	15	Lakeville
01	Becket	08	Concord	02	Gill	04	Lancaster
08	Bedford	02	Conway	07	Gloucester	01	Lanesborough
02	Belchertown	02	Cummington	02	Goshen	09	Lawrence
04	Bellingham			17	Gosnold	01	Lee
11	Belmont	01	Dalton	04	Grafton	02	Leeds
16	Berkley	07	Danvers	02	Granby	04	Leicester
04	Berlin	17	Dartmouth	03	Granville	01	Lenox
02	Bernardston	11	Dedham	01	Gr. Barrington	04	Leominster
07	Beverly	02	Deerfield	02	Greenfield	02	Leverett
09	Billerica	18	Dennis	04	Groton	11	Lexington
04	Blackstone	16	Dighton	09	Groveland	02	Leyden
03	Blandford	13	Dorchester			11	Lincoln
13	Boston	04	Douglas	02	Hadley	08	Littleton
18	Bourne	11	Dover	15	Halifax	03	Longmeadow
09	Boxboro	09	Dracut	07	Hamilton	09	Lowell
08	Boxborough	04	Dudley	03	Hampden	03	Ludlow
04	Boylston	09	Dunstable	01	Hancock	04	Lunenburg
12	Braintree	12	Duxbury	15	Hanover	07	Lynn
18	Brewster			15	Hanson	07	Lynnfield
15	Bridgewater	13	East Boston	04	Hardwick		
13	Brighton	15	E. Bridgewater	08	Harvard	10	Malden
15	Brockton	04	E. Brookfield	18	Harwich	07	Manchester
04	Brookfield	03	E. Longmeadow	02	Hatfield	16	Mansfield
11	Brookline	15	East Wareham	09	Haverhill	07	Marblehead

Area # City / Town

17 Marion
05 Marlborough
12 Marshfield
14 Martha's Viney.
18 Mashpee
13 Mattapan
17 Mattapoisett
08 Maynard
06 Medfield
10 Medford
04 Medway
07 Melrose
04 Mendon
09 Merrimack
09 Methuen
15 Middleborough
02 Middlefield
07 Middleton
04 Milford
04 Millbury
02 Millers Falls
04 Milleville
06 Millis
12 Milton
02 Monroe
03 Monson
02 Montague
01 Monterey
03 Montgomery
01 Mt. Washington

07 Nahant
18 Nantucket
05 Natick
11 Needham
01 New Ashford
17 New Bedford
04 New Braintree
01 New Marlborou.
02 New Salem
09 Newburyport
11 Newton
01 North Adams
09 North Andover
16 North Attleboro
04 N. Brookfield
18 North Chatham
16 North Dighton
10 North Reading
02 Northampton
05 Northborough
04 Northbridge

Area # City / Town

02 Northfield
16 Norton
12 Norwell
06 Norwood

14 Oak Bluffs
04 Oakham
02 Orange
18 Orleans
01 Otis
04 Oxford

03 Palmer
04 Paxton
07 Peabody
02 Pelham
15 Pembroke
04 Pepperell
01 Peru
02 Petersham
02 Phillipston
01 Pittsfield
02 Plainfield
06 Plainville
15 Plymouth
18 Pocasset
18 Provincetown

12 Quincy

12 Randolph
16 Rayham
07 Reading
16 Rehoboth
10 Revere
01 Richmond
17 Rochester
15 Rockland
07 Rockport
13 Roslindale
02 Rowe
09 Rowley
13 Roxbury
02 Royalston
03 Russell
04 Rutland

07 Salem
09 Salisbury
01 Sandisfield
18 Sandwich
07 Saugus

Area # City / Town

01 Savoy
12 Scituate
16 Seekonk
06 Sharon
01 Sheffield
02 Shelburne
05 Sherborn
04 Shirley
04 Shrewsbury
02 Shutesbury
02 South Deerfield
16 Somerset
08 Somerville
13 South Boston
12 South Braintree
17 So. Dartmouth
02 South Hadley
02 Southampton
05 Southborough
04 Southbridge
03 Southwick
04 Spencer
03 Springfield
04 Sterling
01 Stockbridge
10 Stoneham
06 Stoughton
08 Stow
04 Sturbridge
05 Sudbury
02 Sunderland
04 Sutton
07 Swampscott
16 Swansea

16 Taunton
04 Templeton
09 Tewksbury
14 Tisbury
03 Tolland
07 Topsfield
04 Townsend
18 Truro
02 Turners Falls
09 Tyngsborough
01 Tyringham

04 Upton
04 Uxbridge

07 Wakefield
06 Walpole

Area # City / Town

11 Waltham
02 Ware
15 Wareham
04 Warren
02 Warwick
01 Washington
11 Watertown
05 Wayland
04 Webster
05 Wellesley
18 Wellfleet
02 Wendall
07 Wenham
04 West Boylston
15 W. Bridgewater
04 West Brookfield
09 West Newbury
13 West Roxbury
03 W. Springfield
01 W. Stockbridge
14 West Tisbury
18 West Yarmouth
05 Westborough
03 Westfield
09 Westford
02 Westhampton
04 Westminster
11 Weston
16 Westport
06 Westwood
12 Weymouth
02 Whately
04 Whitinsville
15 Whitman
03 Wilbraham
02 Williamsburg
01 Williamstown
08 Wilmington
04 Winchendon
08 Winchester
01 Windsor
10 Winthrop
08 Woburn
04 Worcester
02 Worthington
06 Wrentham

18 Yarmouth

Rev: 7/12/96

